

Monday, October 23, 2006 11:04 AM

Volel Emile, Esq. 512 306 0240

p.05

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OCT 23 2006

Appl. No. 10/076,357
Response dated 10/23/2006
Reply to Office Action of 07/28/2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | |
|-----------------------------|--------------------------|
| In re: Application of: | : |
| Dwip N. Banerjee | : |
| Serial No: 10/076,357 | : Before the Examiner: |
| | : Van Kim T. Nguyen |
| Filed: 02/14/2002 | : Group Art Unit: 2151 |
| Title: APPARATUS AND METHOD | : Confirmation No.: 1515 |
| OF IMPROVING NETWORK | : |
| PERFORMANCE USING VIRTUAL | : |
| INTERFACES | : |

AMENDMENT C

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of July 28, 2006, please amend the above-identified Application as shown below and consider the following Remarks.

Listing of the CLAIMS as amended begins on page 2 of this paper.

Remarks begin on page 6 of this paper.

AUS920010893US1

Page 1 of 9

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ATTN. Van Kim T. Nguyen

Fax Number 1 571 273 8300

Phone Number 571 272 3073

FROM Volel Emile, Esq.

Fax Number 512 306 0240

Phone Number 512 306 7969

SUBJECT Response to &/28/2006 Action (10/076,357)

Number of Pages 13

Date 10/23/2006

MESSAGE

This Fax communication contains:

1. one copy of a Fax Transmittal Form;
2. one copy of a Fee Transmittal Letter, no fee included; and
3. one copy of the Response.

Volel

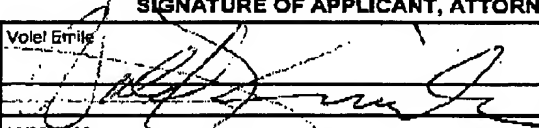
OCT 23 2006


PTO/SO/21 (02-04)
Approved for use through 07/31/2006. OMB 0551-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| | | |
|---|------------------------|-------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/078,367 |
| | Filing Date | 02/14/2002 |
| | First Named Inventor | Dwip N. Banerjee |
| | Art Unit | 2151 |
| | Examiner Name | Van Kim T. Nguyen |
| Total Number of Pages in This Submission | Attorney Docket Number | AU692001093US1 |

| ENCLOSURES (Check all that apply) | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance communication to Technology Center (TC) |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavit/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| | |
|--|---|
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
| Firm or Individual name | Volei Emile |
| Signature |  |
| Date | 10/23/2006 |

| CERTIFICATE OF TRANSMISSION/MAILING | |
|---|---|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | |
| Typed or printed name | Volei Emile |
| Signature |  |
| Date | 10/23/2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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| OF IMPROVING NETWORK | : | |
| PERFORMANCE USING VIRTUAL | : | |
| INTERFACES | : | |

AMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified Application.

☒ No additional fee is required
☐ The fee has been calculated as shown below:

| | Claims Remaining After Amendment | | Highest No. Previously Paid For | | Present Extra | Rate | Addit. Fee |
|---|---|-------|---------------------------------------|---|------------------|---------|---------------|
| Total | 20 | MINUS | 20 | = | 0 | x 50 = | \$ 0.00 |
| Indep. | 4 | MINUS | 4 | = | 0 | x 200 = | \$ 0.00 |
| 1st Presentation of Multiple Dep. Claim | | | | | | x 360 = | \$ 0.00 |

TOTAL \$ 0.00

☐ Please charge my Deposit Account No. 09-0447 in the amount of \$ 0.00.
A duplicate copy of this sheet is enclosed.

AUS920010893US1

Appl. No. 10/076,357

Transmittal of Response dated 10/23/2006

Reply to Office Action of 07/28/2006

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0447. A duplicate copy of this sheet is enclosed.

X Any additional fees required under 37 CFR §1.16 for the presentation of extra claims.

X Any patent application processing fees under 37 CFR §1.17.

Respectfully Submitted

By: 

Volel Emile
Attorney for Applicants
Registration No. 39,969
(512) 306-7969

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